

## Systematic Reviews

Ed Iain Chalmers, Douglas G Altman  
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**"T**he function of the expert reviewer is not to be more right than other people, but to be wrong for more sophisticated reasons." My cynical adaptation of this quote from the political commentator David Butler is meant to encapsulate the arbitrariness that has bedevilled decades of review articles on medical research. Unsystematic, selective, and subjective narrative reviews of the published evidence in a given topic carry a serious risk of erroneous conclusions, and hence the increasing use of more systematic methods is welcome. On the other hand, sceptics argue that statistical combinations of disparate studies may provide oversimplified quantifications of complex issues.

*Systematic Reviews* is an account of the rationale, importance, methods, and limitations of systematic reviews which should help clarify the essentials. The difference of views, styles, and topics expressed by the eight authors is an advantage in presenting a diversity of approaches to understanding systematic reviews. For the most part we are offered enthusiastic accounts of the importance of the topic to advancing medical knowledge, though the critical insights in the chapter on problems may be a welcome antidote for those overwhelmed by the general message.

The opening chapters, on rationale and examples, illustrate well the importance of the systematic approach. The chapters on identifying studies and what data to obtain, which follow, provide the essential tools for objective gathering of evidence.

Alongside the problems chapter, a chapter on heterogeneity provides a constructive insight into how both clinical and statistical differences between studies need investigating in order to avoid oversimplifying one's conclusions. The next chapter, on checklists, emphasises the need to detect limitations, avoid biases, and enhance quality in the review process, and is relevant to the reviewers themselves, to editors, and to users. The final chapter, on reporting, updating, and correcting, encapsulates the need for continuing and international collaborations into major health care issues and discusses the prospect of electronic publication.

Such a concise volume cannot be expected to cover all relevant topics, and in particular there is no account of the statistical methods underlying the meta-analytic approach. Some may sigh in relief at such a deliberate omission, but for those wishing to learn more in this respect the second 1993 issue of the journal *Statistical Methods in Medical Research* is devoted to such statistical issues in meta-analysis.

*Systematic Reviews* rightly emphasises the thoroughness, rigour, and perceptiveness required to identify all appropriate studies, to extract from them the necessary data, and to analyse and interpret the results. Anyone thinking that systematic reviews are an easy way into medical research should be persuaded otherwise. The book is a valuable step to ensuring that quality of the review process is maintained.—STUART J POCOCK, professor of medical statistics, London School of Hygiene and Tropical Medicine

## Conversation Repair: Case Studies in Doctor-Patient Communication

Frederic W Platt  
Little, Brown, \$24.95, pp 194  
ISBN 0 316 71082 2

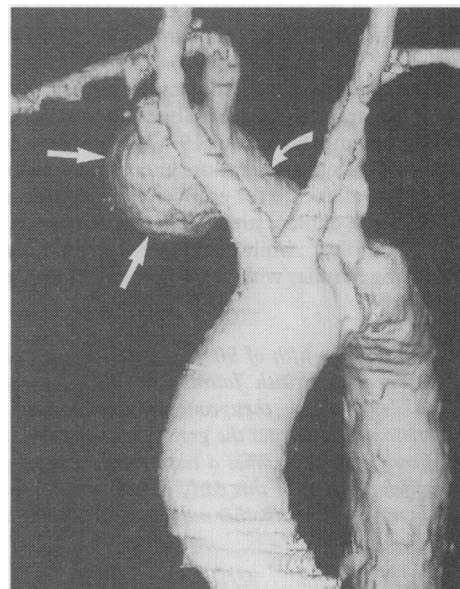
**"P**roblem-based learning in communication skills with the goal of enabling doctors to modify their attitudes to difficult patients and to manage consultations in a patient-centred way." Put like that the main message of *Conversation Repair* sounds dull. It is not. That sentence probably contains more jargon than all seven chapters of this delightfully honest and fresh approach to teaching communication.

Frederic Platt has been teaching communication skills in Denver, Colorado, for 20 years. Here he brings together 53 unsatisfactory doctor-patient dialogues drawn from real practice. They are grouped according to the different possible reasons for the consultations going wrong. Many doctors will recognise the groups: failure to discover what patients mean; lack of effective empathy; problems with being open; failure to clarify the patient's story; common irritations, such as chaotic storytellers; and problems that arise because of a doctor's own feelings.

Each dialogue is followed by a few pertinent questions such as "What triggers your anger?" Readers are encouraged to think for themselves about these questions before the author discusses some personal answers and shares doubts and weaknesses.

This approach makes the book readable, relevant, and stimulating. British readers, however, face some problems. It is set very clearly within the American health care system. A list of frustrations faced by doctors includes such statements as: "Ambulance kidnaps patient to another hospital where doctor doesn't have privileges," and most British doctors are less likely to have arguments about patients' bills.

Other problems for British readers include the lists of proprietary medicines



The astonishing ingenuity in obtaining ever more detailed images of body structure, shown in "shaded surface" computed tomography of a subclavian aneurysm. An illustration from *Helical/Spiral CT* by R K Zeman *et al* (McGraw-Hill, £69.50, ISBN 0 07 072653 1).

given; and they might be disturbed by some neologisms such as "cigaretism" and "oligonounia."

The references are weak, with few citations of British authors. Neither David Pendleton nor Roger Neighbour is mentioned, although Colin Dexter's Inspector Morse is quoted in the chapter heading on empathy. The book is meant for general reading but it is unfortunate that there are so few pointers to the academic basis of what is being taught.

Such concerns are minor. Dr Platt could help many doctors to review their communication, especially when they have been faced with difficulties. The book could also give many teachers of communication new ideas. Above all it focuses on attitudes: the last chapter is devoted to patience, compassion, and humility. In the final case the author tells a story against himself that shows that he, at least, is a good role model for the last of these qualities.—CARL R WHITEHOUSE, professor of teaching medicine in the community, University of Manchester

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